

GOVERNMENT OF THE DISTRICT OF COLUMBIA Office of the Inspector General

Inspector General



December 27, 2001

Ivan C. A. Walks, M.D.
Director
Department of Health
825 North Capitol Street, Northeast
Suite 4400
Washington, D.C. 20001

Ronnie Few Chief Fire and Emergency Medical Services Department 1923 Vermont Avenue, Northwest Suite 201 Washington, DC 20001

Dear Dr. Walks and Chief Few:

This is a Management Alert Report (MAR 002-I-003) to inform you of a safety issue that has come to our attention during our inspection of the Department of Health (DOH). The Office of the Inspector General (OIG) provides these reports when we believe a serious matter requires the immediate attention of a District of Columbia government official.

The OIG Inspection Team has determined that none of the approximately 60 ambulances operated by the Fire and Emergency Medical Services Department (FEMS) has a current inspection and license as required by District law.

Background

There are approximately 60 private and 60 government owned ambulances operating in the District of Columbia. According to the DOH Office of Emergency Health Medical Services (OEHMS) which inspects ambulances, all privately owned ambulances have been inspected and licensed, and have current decals. OEHMS records show, however, that no FEMS ambulance has been inspected since March 2000 and no current licenses have been issued to FEMS.

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Title 29 of the DCMR requires that all ambulances, including those owned by the government, are subject to at least two unscheduled inspections per year to determine compliance with licensing standards. Ambulances without valid licenses are forbidden from operating in the District, and the DCMR mandates a fine or imprisonment for those who violate its provisions (Attachment 1).

OEHMS inspectors have a checklist of "Mandatory Equipment and Supplies for Basic and Advanced Life Support Ambulances" (Attachment 2). Ambulances without current inspections and licenses may not be properly equipped or maintained, and may create a legal liability for the District as the result of citizens who pursue legal action based on claims that they received inadequate or incorrect treatment during a medical emergency. The inspection team could not determine, either from documentation or interviews, why DOH has not conducted the required unscheduled ambulance inspections, or why FEMS has operated ambulances without current licenses in violation of the DCMR.

Recommendation:

- That the Director of the Department of Health and the Chief of the Fire and Emergency Medical Services Department coordinate efforts to ensure that all uninspected District ambulances are inspected and licensed immediately.
- That the Director of the Department of Health and the Chief of the Fire and Emergency Medical Services Department develop a plan to ensure that future inspections and licensing of ambulances take place in full accordance with the provisions of Title 29 of the DCMR, and any related DOH and FEMS policies and procedures.

Please provide your comments on this report by January 10, 2002. Your response should include actions taken or planned, dates for completion of planned actions, and reasons for any disagreements with the issues and recommendations presented.

Should you have questions concerning this report or desire a conference prior to preparing your response, please contact Director of Planning and Inspections Melvina Coakley at 202-727-8490.

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Sincerely,

Charles C. Maddox, Esq.
Inspector General

Enclosure/Attachment

CCM/MLC/jcs

cc: Mr. John'A. Koskinen, Deputy Mayor and City Administrator, Office of the City Administrator

Ms. Margaret Kellems, Deputy Mayor, Public Safety

Government of the District of Columbia

Department of Health

Office of the Director



MAN 1 5 2002

Charles C. Maddox, Esq. Inspector General 717 14th Street, Northwest Suite 500 Washington, D.C. 20005

Ref: MAR002-I-003

Dear Mr. Maddox:

Ambulance inspections are not up to date for DC Fire and EMS units. However, I believe that the following information will clarify the cause of the shortfall in inspections and highlight the need to increase staffing in this relevant office.

The Department of Health's Office of Emergency Health and Medical Services (OEHMS) functions as the State EMS Office and is responsible for the inspection of ambulances. OEHMS is also responsible for all the emergency operations in DOH. Staffing for OEHMS was reduced by 50% during the District's fiscal crisis and for the past 5 years, OEHMS has had only one ambulance inspector who also had other multiple duties.

The effect of the critical staffing shortage has been exacerbated by the number and scope of emergency operations mounted during the past 18 months. DOH and OEHMS in particular, has been faced with extraordinary demands that have made it difficult to meet all of our goals. Such events as the Presidential Inauguration, the transition of D.C. General, West Nile Virus response, flood response, planning for IMF meetings, the response to and aftermath of September 11, 2001 and the response to and aftermath of the Anthrax release required and continues to require a massive commitment of OEHMS staff time.

The D.C. Fire and EMS Department has a fleet of approximately 60 units. Only 36 of those units are typically in service on a day-to-day basis as front line units. The remaining units are considered to be reserve units that are used when front line units are down for servicing or repairs. Reserve units are not fully stocked and ready for service and are not routinely inspected when on the storage lot.

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Action is already being taken to address this issue. An aggressive inspection program is already underway with the inspection of 18 front line units completed. Projected completion date for inspections of all front line units is January 31, 2002. It is important to note that the inspection process must be conducted in such a way as to minimize out-of-service time for the ambulance units and disruption to service delivery. All of the units inspected as of this date have passed. inspection.

An ambulance inspection database is being developed to facilitate the tracking of all ambulance inspections to ensure appropriate notification when a unit is due for inspection. We have also been working with D.C. Fire and EMS to develop a staggered inspection program so that all the units do not outdate at the same time and to ensure that new units are inspected prior to being placed in service. A policy is also being developed to ensure the inspection of reserve units when they are placed in service.

A recruitment action has been initiated to hire a new staff assistant to manage Basic Life Support programs including ambulance inspections. Interviews are being conducted now and we hope to have this position filled in the near future. With the addition of this staff assistant, OEHMS is in a better position to carry out the required scheduled and unscheduled inspections.

If you require any additional information please contact Sherry B. Adams, RN, the Executive Director of OEHMS at 202,442,9111

Chief Health Officer of the District of Columbia

Director, Department of Health

Mr. John A. Koskinen, Deputy Mayor and City Administrator, Office of the City Cc:

Administrator

Ms. Carolyn N. Graham, Deputy Mayor, Children, Youth and Families

GOVERNMENT OF THE DISTRICT OF COLUMBIA FIRE AND EMERGENCY MEDICAL SERVICES DEPARTMENT WASHINGTON, D.C. 20001

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ADDRESS REPLY TO



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January 14, 2002

Mr. Charles C. Maddox, Esq. Inspector General 717 14th Street, N. W., Room 500 Washington, D.C. 20005

Dear Mr. Maddox:

In reponse to the Office of the Inspector General's Management Alert Report (MAR 002-I-003), in the past the DOH's Office of Emergency Health and Medical Services (OEHMS) has been the office to initiate annual ambulance inspections and licensing. Based on our findings, eight ambulances were inspected in March, 2000. According to OEHMS, the remaining fleet was to be inspected but was not completed due to DOH preparing for the World Bank/IMF protests.

DOH has re-initiated the inspection process for the entire fleet (36 transport, 16 reserve, 2 non-transport, 3 special events) with a target completion date of January 31, 2002. As of January 9, 2002, ten (10) units have been inspected by DOH.

In addition to the DOH process, I am recommending the following preventive measures to ensure that our ambulance inspections and licensing remain current:

- When ambulances are changed over for preventative maintenance, which is approximately every month, the DOH inspection sticker is checked for compliance and expiration.
- One (1) month prior to the expiration date, DOH will be notified by the EMS Change Over Shop Foreman for the need of re-inspection of the ambulance's annual license.
- Upon notification from the EMS Change Over Shop Foreman for licenses due for expiration, DOH should respond within 5 business days. This will prevent ambulances with expired licenses from operating on the street per Title 29 of the District of Columbia Municipal Regulations (DCMR).
- DOH will be notified by the EMS Change Over Shop Foreman of all new ambulances needing inspection and licensing prior to being placed into the front line fleet.

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> Establish a process for ambulance inspections at hospital emergency departments after delivery of patients provided this process does not affect the hospital drop or response times.

The above bullets address only the annual inspections and licensing. It does not include DOH's process for unscheduled inspections. One final detail that is important to know is that DCFEMS has an in-house maintenance inspection procedure exclusive of DOH.

Sincerely,

Ronnie Few

Fire/EMS Chief

John A. Koskinen, City Administrator

Margret Kellems, Deputy Mayor for Public Safety & Justice

Reggie Winters, OEHMS

Chief Ronnie Fear